

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1							51		
2							52		
3							53		
4							54		
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45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	7	↓		↓		↓	TOTAL IND.	↓	↓
TOTAL DEP.	26	←		←		←	TOTAL DEP.	←	←
TOTAL CLAIMS	33						TOTAL CLAIMS		

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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